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July 10, 2012

Via Hand Delivery

Hon. Glenn Rosenbloom, Acting Chairman and Members of the Planning Board Village of Sleepy Hollow 28 Beekman Avenue Sleepy Hollow, New York 10591

Re: Open Door Family Medical Center

300 North Broadway, Sleepy Hollow, New York

Dear Acting Chairman Rosenbloom and Members of the Planning Board:

While most of the issues raised at the public hearing have been addressed in previous submissions on behalf of Open Door, we believe a few warrant further explanation and/or clarification. This submission is made for that purpose.

1. Pedestrian Safety: It was pointed out during the hearing that the accident rate at three of the intersections studied exceeded the Critical Accident Rate ("CAR"), the implication being that those intersections are not safe for pedestrians. We respectfully submit that the emphasis on the CAR is misplaced and that, when examined in their totality, the data and analysis regarding pedestrian facilities demonstrates that the existing facilities are more than adequate to ensure pedestrian safety and that the increase in pedestrian traffic as a consequence of the new Open Door office will not adversely impact pedestrian safety or the operating levels of the area intersections.

First, none of the accidents at the intersections that exceed the CAR (North Broadway at Gordon Avenue/Lawrence Avenue, North Broadway at Bedford Road, and North Broadway at Beekman Avenue/Hudson Terrace) involved pedestrians. *See* the Adler Consulting Traffic and Parking Study for the Open Door Medical Offices Relocation Project, dated June 28, 2012 (the "Adler Traffic Study"), pages 57-64. In fact, none of the 98 accidents in the vicinity of the proposed Open Door medical office evaluated by Adler Consulting involved pedestrians. That was the case notwithstanding that the intersections are currently heavily used by pedestrians. Based

¹ It was also pointed out that a number of the intersections had accident rates that exceeded the Statewide average. According to Bernie Adler, P.E., of Adler Consulting, while the Statewide average was provided for informational purposes, it is not a relevant standard by which to assess the operation and safety of an intersection because the Statewide average provides information for a wide set of conditions and does not differentiate between specific operational characteristics such as the number of lanes.

upon field investigations of the pedestrian activity at the North Broadway/New Broadway/Bedford Road/Hudson Terrace/Beekman Avenue intersections, which cover two of the three intersections with accident rates that exceeded the CAR, Adler recorded more than 270 pedestrians crossing the streets during the weekday morning peak hour (8:00-9:00 a.m.), more than 230 pedestrians crossing the streets during the weekday midday peak hour (12:00 noon to 1:00 p.m.) and more than 115 pedestrians crossing the streets during the weekday evening peak hour (4:00-5:00 p.m.). Yet, no pedestrian accidents occurred at those intersections during the five year period analyzed by Adler Consulting. See Adler Traffic Study, pages 20-23 and Figures 2, 3 and 4.

The existence and condition of the pedestrian facilities and equipment at area intersections, i.e. sidewalks, crosswalks, curb ramps, detectable warning tiles, and pedestrian crossing signals/equipment, contribute to, not detract from, the pedestrian safety at all intersections, including the ones that exceed the CAR. *See* Adler Traffic Study, pages 11-20. As set forth in the Study, existing pedestrian facilities and equipment, particularly in the area of the proposed Open Door Medical office where patients are expected to travel, are in good physical condition (in some cases better condition than those facilities at intersections with accident rates below the CAR) and provide adequate crossing time for safe pedestrian movement. Indeed, according to the Village building department the crosswalk across sidewalks along North Broadway at the project site were recently reconstructed by the Village within the last two years.

Second, that an intersection exceeds a CAR is not *per se* evidence of an unsafe condition. Rather, as explained in the Adler Traffic Study, "when the actual accident rate for the intersection or roadway segment exceeds the Critical Accident Rate, the location is eligible for additional study." Adler Traffic Study, pages 61-62. The CAR of the area intersections is an existing condition having nothing to do with Open Door's existing or proposed operations. Presumably, the Village has not identified a problem with the intersections warranting action since none has been taken. Nevertheless, at Open Door's request, Adler Consulting conducted an additional study, the results of which are summarized in a Letter dated July 9, 2012, submitted herewith. As explained in the Letter, Adler found that there are a significant number of side-swipe accidents resulting from the reduction of two lanes to one lane in the southbound direction through the intersection of North Broadway with Beekman Avenue, Hudson Terrace and Bedford Road without any signage and with minimal pavement markings. The addition of suggested signs will help to reduce the accident picture at this location. Further, there is a "zone of confusion" on the eastbound approach of Beekman Avenue with North Broadway. This is also due to the lack of clearly defined lanes for the right and left/thru movements because of missing pavement markings.

Adler explains in its Letter that some signage (a low cost remedy) could be installed by the Village (with the New York State Department of Transportation's ("DOT") consent) to help reduce the number of accidents should the Village want to address the CAR issue.

Third, Adler Consulting performed a sensitivity analysis to evaluate the impact of additional pedestrian traffic on the operating levels of area intersections by dramatically increasing the number of pedestrian conflicts with right turns at the intersections of North Broadway with

Beekman Avenue, North Broadway with Bedford Road and North Broadway with New Broadway to 200 and found that even with that increase, the levels of service of that intersection would not be adversely affected. *See* Adler Traffic Study, page 43. Further, as Adler Consulting reported at the June 28, 2012 Planning Board meeting, it is anticipated that between 8:00 a.m. and noon, Open Door will only generate a total of 13 pedestrians per hour (less than 5 every 20 minutes), 19 pedestrians during the midday period (noon to 4:00 p.m.) (less than 7 pedestrians every 20 minutes) and 12 pedestrians per hour during the afternoon period (4:00 p.m. to 7:00 p.m.) representing 4 pedestrians every 20 minutes.

Fourth, Open Door has expressed its willingness to reimburse the Village for the cost of a crossing guard at the North Broadway crosswalk across from Open Door's proposed medical office. This measure would benefit the entire community using that crosswalk, not just patients of Open Door.

Fifth, Open Door has begun to put into motion a multi-lingual educational campaign with its patients to teach them the safest routes to use walking to the new medical office. Of the 2,657 patients living within 1 mile of 300 North Broadway, 2,532 reside on the west side of Route 9; the routes being promoted by Open Door correspond well with those places of residence and will be convenient for the patients to follow. Enclosed herewith are copies of flyers Open Door has prepared (in English and Spanish) for distribution to patients for this purpose. It bears noting that Open Door's patients are not typically disabled (physically or mentally). The current office is located around the corner from the proposed office and patients who will walk to the new medical office currently find their way to the existing medical office, apparently without problems; no evidence of excessive pedestrian accidents in or around the existing office has been provided to the Board. Open Door has a long and distinguished record of patient education and is committed to making safe access to its new offices part of that program.

2. Open Door's Pre-Acquisition "Due Diligence" and Why Parking Was Not Considered an Impediment: We got the distinct impression from comments made to the Board at the hearing and during earlier meetings with the Board that opponents of Open Door's relocation plan are frustrated that Open Door purchased the building notwithstanding that the required number of parking spaces could not be accommodated and that they feel that Open Door is "dumping" its "parking problem" on the Webber Park neighborhood. Contrary to the comments, Open Door investigated the site and the required approvals before purchasing the building. Indeed, Open Door understood that the property and building faced an off-street parking challenge that only a unique use would be able to overcome.

Open Door did not view the expected parking deficiency to be an impediment to operating its medical office successfully or anticipate that it would result in an adverse impact on surrounding commercial and residential properties because Open Door knew from decades of experience that traditional parking requirements, such as the one from which it will be seeking a variance here, have no nexus to the needs or requirements of its use. As the Board knows, Open Door currently operates its medical offices at 80 Beekman Avenue, around the corner from the

proposed office, with NO off-street parking available to its staff and patients. Open Door knew that the second floor of that building could be renovated to provide an additional 5,000 square feet of medical office space (were the building structurally sound) with no off-street parking provided. Open Door has operated successfully at the existing location since 1995 (and at 46 Beekman Avenue for ten years before that) notwithstanding the lack of parking, due primarily to the established fact that the overwhelming majority of its patients (70 percent) do not drive to their appointments.

The lack of available parking is not a new condition with which Open Door has had to deal and it has an established record of operating successfully at each of its other three facilities for decades under similar, if not more challenging, circumstances. The Port Chester Office (25,000 s.f.) has no parking and has been operating successfully in its current location for 6 years; the Ossining medical office (24,000 s.f.) has no parking and has been operating successfully for 40 years; and Mount Kisco has only 16 spaces and has operated successfully for 7 years. The reason for this success rate is because the majority of Open Door's underprivileged patients do not own an automobile or drive to their appointments. Open Door had to obtain zoning approvals for some of its other locations.² In those cases, Open Door was able to establish the deminimus need for parking for patients and demonstrate that it would educate its patients about how to get to its facility safely, make alternate arrangements for staff parking and ensure staff cooperation with the alternate arrangements. Stated differently, the parking challenges presented by the proposed site had been dealt with successfully by Open Door on numerous previous occasions. It was within this framework and experience that Open Door considered purchasing the 300 North Broadway property.

As explained at the hearing by Open Door's President and Chief Executive Officer, Lindsay Farrell, she was approached by representatives of the Village to explore alternate locations for Open Door's offices and, when she identified the proposed site, she discussed the planned relocation with Village representatives. While Open Door does not view such discussions as exempting it from having to obtain zoning and land use approvals, the discussions demonstrate that Open Door was neither irresponsible nor naïve about relocating its offices to the proposed site, as some of the opponents have alluded.

²It was suggested at the hearing that Open Door's experience in Port Chester, Mount Kisco and Ossining was not relevant because those municipalities are larger than Sleepy Hollow and have more parking available. In Open Door's experience, the amount of public parking existing in those communities is no greater than that existing in Sleepy Hollow. In Mount Kisco, for example, Open Door is located in a residential area where residents rely significantly on on-street parking and public lots in the vicinity of the office are largely restricted to commuter parking and/or businesses in the downtown area.

The notion that Open Door is "dumping" its "parking problem" on the Webber Park neighborhood is inaccurate. In Open Door's view, there is no "parking problem" because Open Door has made arrangements for its staff (the only real source of demand for parking) to park at Phelps Memorial Hospital Center, an arrangement to which the Board heard Phelps' President, Mr. Keith Safian, commit. Therefore, staff parking will not impose any burden on the Webber Park residential neighborhood. As for patient parking, Open Door is providing 10 spots which should be adequate to address the needs of its patients except possibly during the busiest time of the week/day, i.e. Monday at 12:00 noon-4:00 p.m., and in that case, based upon projected patient flows, there may be a need for one or two on-street parking spaces. The Adler Traffic Study demonstrates that far more than two parking spaces are available within one quarter mile of the site at all times of day.

In addition to minimizing the demand for on-street parking through the foregoing efforts, Open Door has also undertaken efforts to keep vehicular traffic out of the Webber Park neighborhood. No ingress or egress to/from the building will be allowed from New Broadway. All but two of the existing doors on New Broadway will be converted to the building's existing windowed facade and these doors will be converted to a panic-bar-type emergency egress only. Emergency egress is required by the building and fire prevention code. Also enclosed herewith is a rendering of Open Door's proposed signage to be sited along North Broadway which directs patients to the main entrance on North Broadway and away from New Broadway.

Open Door has demonstrated sufficient area for taxi cabs to maneuver for drop-offs and pick-ups in the parking lot. Still further, it will undertake to contact local taxi companies to advise them where fares to the site should be dropped and, as importantly, to let them know not to make drop-offs on New Broadway. (Open Door has already developed a list of companies and contact addresses and numbers to use for this purpose.) While Open Door cannot prohibit taxi cabs from driving on New Broadway (it is a public street), it will monitor the situation in an effort to encourage cabs to use the North Broadway parking lot for drop-offs and to discourage them from traveling on New Broadway.

- 3. <u>Use of the Conference Room</u>: As was explained at the hearing, the conference room will be used for internal purposes only by people already at the building or who arrive there on foot or by the staff shuttle from Phelps. Therefore, the conference room will not result in an increased demand for parking not already provided for by the shuttle system.
- 4. <u>Patient Numbers</u>: Submitted herewith is an estimate of the hourly volume of patients anticipated at the new office once the Residency Program is fully operational (i.e. 2014) and on what is historically the busiest day of the week (i.e. Monday). These projections were discussed by Mr. Adler at the June 28, 2012 hearing and are the basis of his assessment that the 10 spaces that will be provided will be enough to satisfy the needs of 27 percent of the patients who are expected to drive to their appointments except during the busiest period when the demand for parking may exceed the on-site supply by one or two.

5. <u>Miscellaneous Other Items</u>: In addition to the foregoing, Open Door wants to clarify that: (i) the proposed new offices are just over 12,300 s.f., not 15,000 s.f. as one speaker at the hearing stated; (ii) there is no restriction against a medical office in the building for which Open Door requires a variance; (iii) the proposed offices are fully ADA-compliant; and (iv) the discussion in the Adler Traffic Study about non-ADA-compliant improvements referred to existing pedestrian facilities (e.g. sidewalks and crosswalks) maintained by the Village, not Open Door.

We look forward to addressing the Board further at the continuation of the Public Hearing on July 19, 2012, at which time our technical consultants would be pleased to answer any further questions the Board Members may have. If you have any questions in the interim, please let us know. Thank you for your courtesy.

Very traly yours.

Kyle C. McGovern

KCM/cg Enclosures

cc: Via Electronic Mail (w/enclosures)
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